"Open Event" Day Members Remittance Form 2019

The Arabian Horse Society of Australia Ltd

THIS FORM IS TO BE COMPLETED AND RETURNED WITH PAYMENT TO THE ARABIAN HORSE SOCIETY OF AUSTRALIA LTD. WITHIN 30 DAYS OF THE EVENT.

Failure to comply may mean that there is no cover in the event of a claim and the ability to negotiate this in future years may be jeopardised.

Affiliated Club Name: .....

Name and Date of Event: .....

We attach a cheque for: .....
(Cheques should be made payable to Arabian Horse Society of Australia Ltd)

Being for: ..... Day members @ $10 each (per day) = $.....

Names and Addresses of Day Members at the above Event:

First Name	Surname	Address

Signature:
Position:
Date:

Return to: Arabian Horse Society of Australia Ltd
Post Office Box 415
RICHMOND NSW 2753

Gow-Gates

AHSA
ARABIAN HORSE SOCIETY OF AUSTRALIA